## PA CNMP Signature Page and Checklist Submit with plan

OWNER/OPERATOR:			
OWNER/OFERATOR.			
Address & Phone			
Farm Service Agency Farm & Tract No.			
The following Technical Service Providers (certify that their element meets all applicable)		vith the development of the CNN	 ⁄IP ar
Manure and Wastewater Handling and S	torage – Certified Sp	pecialist signature	
Signature:		Date:	
Name (print clearly):			
Title:	TSP #:		
Nutrient Management – Certified Special	<b>'</b>		
Signature:		Date:	
Name (print clearly):			
Title:	TSP #:		
Land Treatment Practices – Certified Spe	<b>'</b>		
Signature:	olullot olgilataro	Date:	
Name (print clearly):		Date.	
Title:	TSP #:		
	135 #.		
Optional Section Signature:		Date:	
Name (print clearly):		Date.	
Title:	TSP #:		
TOD CAIMD Diam Amountal (Contified County			
As a Certified Conservation Planner, I certification contains the necessary elements as per the appear to be in conformance with NRCS states.	fy that I have reviewed CNMP checklist. The	e planned components of the Cl	ed th
Signature:	TSP #:	Date:	
Owner/Operator			
As the owner/operator, I certify that I, as the and agree the items/practices listed in each keeping all necessary records associated wimplement/accomplish this CNMP in a time	n element are needed with the implementation	I understand that I am respons n of this CNMP. It is my intent to	ible f
Signature:	Date		

## Comprehensive Nutrient Management Plan Checklist Submit with plan

County:	Date Plan Submitted:		CNMP is written for (Crop year or Calendar Year)	
Producer/Owner Name, Address & Pho	one Number	Farm #(#) Tract #(s) Field		
Name of CNMP planner(s) and section	(s) planned:	11010	TSP CNMP Plan Approval	
1.	4.		Certified Conservation	
2.	5.			
			Planner:	
3.	6.			
Comprehensive Nutrient Ma	nagement Plan ation in Plan/Co			
1.Manure & Wastewater Ha	ndling and St	orage		
a. CNMP Engineering Inven				
production site and each sec				
Include a site sketch.	-	-		
b. Calculated animal units, r				
storage volumes, both curre		• •		
expansion. Documentation		I manure and		
wastewater generated on sit		<b>(</b>		
c. Siting and operation evaluation for all the	lations of existi	ng facilities		
Production facility     Animal late (Animal)	al Camaamtratia	n Araga)		
<ul><li>Animal lots (Animal Concentration Areas)</li><li>Waste storage facilities</li></ul>				
_		Transfor		
Manure stacking areas / Manure Transfer     Toold and silvers started.				
<ul><li>Feed and silage storage</li><li>Safety</li></ul>				
• O&M				
d. Siting and sizing evaluati	ons of any pror	nosed waste storage		
facilities	one or any prop	occa wacto ctorage		
e. Surface water runoff eval	uations			
f. Emergency action planning				
g. Evaluate alternative manure and wastewater utilization				
activities.				
h. Resource concerns and	corresponding of	development of BMP		
alternatives for each concern				
i. Evaluate alternatives/land	owner decision	IS.		
j. Record Keeping System	anina avatam fe	ar anill and increasion		
		or spill and inspection		
of Manure and Wa facilities.	istewater Hand	lling and Storage		
Recommendation	e for improving	record keening		
system.	s for improving	record Recping		
2. Land Treatment Practice	 es			
a. Date plan was prepared	<u>~</u>			
b. Aerial maps of land applic	ation area			
c. Conservation plan map(s) with marked setbacks, wells, buffers,				
waterways, environmental				
sinkholes), and land use o				
d. Soils map with appropriate	interpretations	8		